

Center for Educational Performance and Information
Security Agreement to Access the
Nonpublic School Personnel Report

ISD Code: _____ District Code _____

School/facility (building) Code: _____ School/facility (building) Name _____

School Address _____

Step 1. Name of the designated individual whom the school administrator authorizes to access the school/facility (building) for the Michigan Nonpublic School Personnel Report

Name

Title

E-mail Address

Phone Number

Step 2. For the designated individual: If you already have an Michigan Education Information System (MEIS) account, go to Step 4. Separate security agreements must be completed and faxed for each application (e.g., Michigan Electronic Grants System (MEGS), Nonpublic School Personnel Report). If you do not already have an MEIS account number, use Internet Explorer to access the Internet and go to the following URL:

<https://cepi.state.mi.us/MEISPublic/>

Step 3. Click on the MEIS logo. On the next screen, click on "**Create an MEIS Account.**" There you will be instructed on how to create a new account.

Step 4. Once an MEIS account number is obtained, please enter the following requested information:

Authorized MEIS Account Number (e.g., A1234567): _____

Authorized MEIS Account Login Name (e.g., smithjan): _____

NOTE: If you are replacing a formerly authorized individual, please download and complete a MEIS Authorized User Removal Request Form. This document can be downloaded from:

http://www.michigan.gov/documents/CEPI-MDE_MEISRemovalReqFrm_119601_7.pdf

Step 5. For the authorized individual: *Please sign below.*

I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility.

Signature of Individual to be Authorized

Date

Step 6. For the School Administrator: *Please Sign Below.*

I attest that the above-named individual is authorized by me to access the school/facility (building) data submission for school personnel to the Nonpublic School Personnel Report for my school/facility (building) and that the data are current and accurate.

Name of School/facility (building)/Agency

Signature of Superintendent/Administrator

Date

Step 7. Mail or fax this form to:

**DIT Client Service Center
235 S. Grand, Suite 304
Lansing, Michigan 48913
Fax #: (517) 241-8439
E-mail: Help-Desk@michigan.gov**